



COMMERCIAL FOR SALE DATA INPUT

* = Required Field

Listing Contract Information

Property Type Industrial Investment Office Residential Income Retail Other

*Parcel ID No: _____

*Listing Date: _____

*Expiration Date: _____

*Listing Price (\$): _____

***Service Type**

- Full Service
- Limited Service
- Entry Only

***Listing Contract Type**

- Exc. Right to Sell/Lease
- Exc. Agency to Sell/Lease
- Exc. Right to Sell/Lease w/ Reserved Prospect
- Exc. Agency w/ Reserved Prospect
- Exc. Right to Sell/Lease w/ Variable Rate Comp
- Exc. Agency w/ Variable Rate Comp

Items not included in sale: _____

Commission/Compensation

***Buyer Agent Compensation**

- Percentage % _____
- Dollar Amount \$ _____

Compensation Notes (150 Characters)

*Potential Short Sale Yes No Short Sale Comments _____

Agent & Office Information

*List Agent ID _____ List Agent _____

List Agent Office _____

Co-List Agent ID _____ Co-List Agent _____

Co-List Agent Office _____

Listing Address Information

Street # Pre-Direction *Street Name Street Type Post Direction Unit #

*State _____ *County _____ *City _____ *Zip _____

*Neighborhood _____ Complex Name _____

Tax Information

*Property Tax \$ _____ *Assessment \$ _____

*Mil Rate _____ *Tax Year _____ District Tax \$ _____

Commercial Information

Present Use: _____

Potential Use: _____

Business Included: Yes No Negotiable

Income & Expense Information

Gross Annual Income \$ _____ Gross Annual Expense \$ _____ Net operating Income \$ _____

Structural/Exterior Information

Year Built: _____	Number of Units: _____	Number of Tenants: _____
Ceiling Height: _____	Number of stories: _____	ADA compliant: <input type="checkbox"/> Yes <input type="checkbox"/> No
# of Loading Docks: _____	# of Restrooms: _____	# of Overhead Doors: _____
SqFt: _____	Space is Subdividable: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	Industrial SqFt: _____
SqFt Source	Office SqFt: _____	Residential SqFt: _____
<input type="checkbox"/> Approximate	Retail SqFt: _____	Warehouse SqFt: _____
<input type="checkbox"/> Owner	Additional Space Available <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Public Records		

Commercial Features (16 Max)

- | | | |
|--|---|---|
| <input type="checkbox"/> Elevator
<input type="checkbox"/> Employee Lounge
<input type="checkbox"/> Fire Suppression System
<input type="checkbox"/> Freight Elevator
<input type="checkbox"/> Handicap Design | <input type="checkbox"/> Hoists
<input type="checkbox"/> Intercom
<input type="checkbox"/> Living Space Available
<input type="checkbox"/> Loading - Dock Height
<input type="checkbox"/> Loading - Grade | <input type="checkbox"/> Loading - Rail Height
<input type="checkbox"/> Loading - Waterfront
<input type="checkbox"/> Public Restrooms
<input type="checkbox"/> Security System
<input type="checkbox"/> Window Display |
|--|---|---|

*Construction (3 Max)

- | | | | | |
|--------------------------------|-----------------------------------|-----------------------------------|----------------------------------|--------------------------------|
| <input type="checkbox"/> Frame | <input type="checkbox"/> Stone | <input type="checkbox"/> Block | <input type="checkbox"/> Masonry | <input type="checkbox"/> Steel |
| <input type="checkbox"/> Brick | <input type="checkbox"/> Aluminum | <input type="checkbox"/> Concrete | <input type="checkbox"/> Metal | <input type="checkbox"/> Other |

Flooring (9 Max)

- | | | | | |
|---------------------------------------|----------------------------------|--------------------------------|--|-------------------------------|
| <input type="checkbox"/> Ceramic Tile | <input type="checkbox"/> Parquet | <input type="checkbox"/> Slate | <input type="checkbox"/> Vinyl | <input type="checkbox"/> Wood |
| <input type="checkbox"/> Concrete | <input type="checkbox"/> Plywood | <input type="checkbox"/> Tile | <input type="checkbox"/> Wall-to-Wall Carpet | |

Covered Parking Space: _____ Uncovered Parking Space: _____ Total Parking Spaces: _____ Parking Spaces per 1000sqft: _____

Exterior Features (20 Max)

- | | | | | |
|---|--|---|---|--|
| <input type="checkbox"/> Awnings | <input type="checkbox"/> Doors - 20+ ft | <input type="checkbox"/> Levelers | <input type="checkbox"/> Outside Storage Area | <input type="checkbox"/> Storage Building |
| <input type="checkbox"/> Door Sign | <input type="checkbox"/> Doors - under 10 ft | <input type="checkbox"/> Lighting | <input type="checkbox"/> Pole Sign | <input type="checkbox"/> Underground Sprinkler |
| <input type="checkbox"/> Doors - 10-15 ft | <input type="checkbox"/> Gutters | <input type="checkbox"/> Loading Dock/Grade | <input type="checkbox"/> Roof Sign | <input type="checkbox"/> Underground Utilities |
| <input type="checkbox"/> Doors - 16-20 ft | <input type="checkbox"/> Incinerator | <input type="checkbox"/> Loading Dock/Well | <input type="checkbox"/> Sidewalk | <input type="checkbox"/> None |

Handicap Features (7 Max)

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> 32" Minimum Door Widths | <input type="checkbox"/> Exterior Curb Cuts | <input type="checkbox"/> Low Cabinetry | <input type="checkbox"/> Ramps |
| <input type="checkbox"/> 60" Turning Radius | <input type="checkbox"/> Hallways 36+ Inches Wide | <input type="checkbox"/> Low Counters | <input type="checkbox"/> Remote Devices |
| <input type="checkbox"/> Accessible Bath | <input type="checkbox"/> Handicap Parking | <input type="checkbox"/> Modified Range | <input type="checkbox"/> Roll-In Shower |
| <input type="checkbox"/> Appliances are Low/Secure | <input type="checkbox"/> Hard/Low Nap Floors | <input type="checkbox"/> Multiple Entries/Exits | <input type="checkbox"/> Roll-under Sink(s) |
| <input type="checkbox"/> Bath Grab Bars | <input type="checkbox"/> Lever Door Handles | <input type="checkbox"/> Raised Dishwasher | <input type="checkbox"/> Scald Control Faucets |
| <input type="checkbox"/> Chair Lift | <input type="checkbox"/> Lever Faucets | <input type="checkbox"/> Raised Toilet | <input type="checkbox"/> Special Needs Transport |
| <input type="checkbox"/> Closet Bars 15-48" Off Floor | | | |

*Foundation (2 Max)

- | | | | | |
|--------------------------------|-----------------------------------|---------------------------------|--------------------------------|-------------------------------|
| <input type="checkbox"/> Block | <input type="checkbox"/> Concrete | <input type="checkbox"/> None | <input type="checkbox"/> Slab | <input type="checkbox"/> Wood |
| <input type="checkbox"/> Brick | <input type="checkbox"/> Masonry | <input type="checkbox"/> Piling | <input type="checkbox"/> Stone | |

*Roof (2 Max)

- | | | | | | |
|---|-----------------------------------|--|-----------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Asphalt Shingle | <input type="checkbox"/> Shake | <input type="checkbox"/> Composition | <input type="checkbox"/> Flat | <input type="checkbox"/> Rubber | <input type="checkbox"/> Not Applicable |
| <input type="checkbox"/> Fiberglass Shingle | <input type="checkbox"/> Slate | <input type="checkbox"/> Concrete | <input type="checkbox"/> Membrane | <input type="checkbox"/> Tar/Gravel | <input type="checkbox"/> Other |
| <input type="checkbox"/> Wood Shingle | <input type="checkbox"/> Built Up | <input type="checkbox"/> EPDM Syn.Rubber | <input type="checkbox"/> Metal | <input type="checkbox"/> Tile | |

*Garage/Parking Info (3 Max)

- | | | | | |
|--|---|---|---|--------------------------------|
| <input type="checkbox"/> Attached Garage | <input type="checkbox"/> Covered Garage | <input type="checkbox"/> Unassigned | <input type="checkbox"/> Parking Garage | <input type="checkbox"/> Other |
| <input type="checkbox"/> Detached Garage | <input type="checkbox"/> Unpaved | <input type="checkbox"/> Driveway | <input type="checkbox"/> Parking Lot | <input type="checkbox"/> None |
| <input type="checkbox"/> Unit Garage | <input type="checkbox"/> Paved | <input type="checkbox"/> On Street Parking | <input type="checkbox"/> Security | |
| <input type="checkbox"/> Carport | <input type="checkbox"/> Assigned | <input type="checkbox"/> Off Street Parking | | |

Units

Unit 1 Unit Type: _____ # of Units of this type: _____ Full Baths _____ Half Baths _____
Avg SqFt Per Unit: _____ Avg Monthly Rent Per Unit \$ _____ # Vacant Units _____
Appliances In Unit (Max 12) _____

Unit 2 Unit Type: _____ # of Units of this type: _____ Full Baths _____ Half Baths _____
Avg SqFt Per Unit: _____ Avg Monthly Rent Per Unit _____ # Vacant Units _____
Appliances In Unit (Max 12) _____

Unit 3 Unit Type: _____ # of Units of this type: _____ Full Baths _____ Half Baths _____
Avg SqFt Per Unit: _____ Avg Monthly Rent Per Unit _____ # Vacant Units _____
Appliances In Unit (Max 12) _____

Unit 4 Unit Type: _____ # of Units of this type: _____ Full Baths _____ Half Baths _____
Avg SqFt Per Unit: _____ Avg Monthly Rent Per Unit _____ # Vacant Units _____
Appliances In Unit (Max 12) _____

Unit 5 Unit Type: _____ # of Units of this type: _____ Full Baths _____ Half Baths _____
Avg SqFt Per Unit: _____ Avg Monthly Rent Per Unit _____ # Vacant Units _____
Appliances In Unit (Max 12) _____

Unit 6 Unit Type: _____ # of Units of this type: _____ Full Baths _____ Half Baths _____
Avg SqFt Per Unit: _____ Avg Monthly Rent Per Unit _____ # Vacant Units _____
Appliances In Unit (Max 12) _____

Unit 7 Unit Type: _____ # of Units of this type: _____ Full Baths _____ Half Baths _____
Avg SqFt Per Unit: _____ Avg Monthly Rent Per Unit _____ # Vacant Units _____
Appliances In Unit (Max 12) _____

Unit 8 Unit Type: _____ # of Units of this type: _____ Full Baths _____ Half Baths _____
Avg SqFt Per Unit: _____ Avg Monthly Rent Per Unit _____ # Vacant Units _____
Appliances In Unit (Max 12) _____

Unit 9 Unit Type: _____ # of Units of this type: _____ Full Baths _____ Half Baths _____
Avg SqFt Per Unit: _____ Avg Monthly Rent Per Unit _____ # Vacant Units _____
Appliances In Unit (Max 12) _____

Unit 10 Unit Type: _____ # of Units of this type: _____ Full Baths _____ Half Baths _____
Avg SqFt Per Unit: _____ Avg Monthly Rent Per Unit _____ # Vacant Units _____
Appliances In Unit (Max 12) _____

Unit Type choices: 1 Bedroom - 2 Bedroom - 3 Bedroom - 4+ Bedroom - Efficiency - Industrial - Office - Retail

Appliances Included Choices: Allowance - Electric Cooktop - Gas Cooktop - Cook Top - Electric Range - Gas Rang - Oven/Range - Counter Grill - Wall Oven - Microwave - Range Hood - Refrigerator - Freezer - Subzero - Icemaker - Dishwasher - Disposal - Compactor - Instant Hot Water Tap - Washer - Electric Dryer - Gas Dryer - Dryer - Wine Chiller - None

Lot & Location Information

Acres: _____

***Zoning:** _____

In Flood Zone

Elevation Certificate

Traffic Count: _____

Road Frontage FT: _____

Yes
 No

Yes
 No

***Location**

Highway Access
 Downtown
 Urban (5 Max)

Suburban
 Rural
 Park

Historic Area
 Industrial Park
 Office Park

Shopping Mall
 Strip Mall
 Other

***Road Frontage Description (3 Max)**

Interstate Highway
 U.S. Highway
 State Road

Municipal Street
 Private Road
 Right of Way

Cul-De-Sac
 Paved Road
 Unpaved Road

Dirt/Gravel Road
 Unimproved Road
 None

***Lot Description (6 Max)**

On Cul-De-Sac
 Farm Land
 Zero Lot Line

Additional Land Avail.
 Some Wetlands
 Dry

Corner Lot
 Golf Course Frontage
 Level Lot

Sloping Lot
 Treed
 N/A

***Available Documents (10 Max)**

Appraisal
 Brochure
 Demographic Data
 Environmental Site Assess.
 Environmental Site Assess. (Phase 1)
 Environmental Site Assess. (Phase 2)

Flood Elevation Certificate
 Lead Disclosure
 Legal Description
 Mechanical Drawing
 Photo/Survey
 Plot Plan/Survey

Soil Survey
 Subdivision Approval
 Topographical Survey
 Zoning Approval
 Other
 None

Utility Information

***Heat Type (4 Max)**

Baseboard
 Gas on Gas
 Heat Pump

Hot Air
 Hot Water
 Hydro Air

Radiant
 Radiator
 Solar

Space Heater
 Steam
 Wall Unit

Warm Air
 Wood/Coal Stove
 Zoned

Other
 No Heat

Heat Fuel (4 Max)

Bottle Gas
 Coal

Electric
 Geothermal

Kerosene
 Natural Gas

No Fuel
 Oil

Other
 Propane

Solar
 Wood

***Available Utilities (6 Max)**

Electric
 Electric Available
 Gas

Gas Available
 Telephone
 Phone Available

Cable
 Cable Available
 Underground Required

Fire Suppression System
 None/Unknown

Electrical Voltage: _____ Electrical Amperage: _____ Electrical Phases: _____ # of Electrical Services: _____

***Water (2 Max)**

Public Water Connected
 Public Water In Street

Private Water System
 Private Well

Shared Well
 Well Required

Other
 None

***Cooling (4 Max)**

Attic Fan
 Ceiling Fans

Central Air
 Heat Pump

Wall Unit
 Whole House Fan

Window Unit
 Zoned

None

***Sewage System (2 Max)**

Public Sewer Connected
 Public Sewer In Street

Septic
 Shared Septic

Cesspool
 Septic Required

Other
 None

Annual Sewer Usage Fee _____

Sewer Assessment Info _____

Association Information

Property Manager: _____

Property Management's Phone _____

Property Management's Email _____

Additional Information/ShowingTime

Acceptable Financing

- Assumable Owner
- CHFA FHA VA

***Where My Listings Go**

- Homes.com Zillow Group
- IDX Homesnap
- Realtor.com None

***Display Property Address on Internet?**

- Yes No

***Showing Instructions** (Limit: 125 Characters)

ShowingTime Instructions (Limit: 300 Characters)

***Directions** (Limit: 255 Characters)

***Lockbox Description**

- SmartMLS Elec.
- Non-Compatible Elec
- ECAR-SentriLock
- Combo
- Call List Office
- None

Lockbox Location: _____

***Possession/Occupancy:** _____

***Owner:** _____

Owner Phone: _____

***Sign** Yes No

Occupied By: Owner Tenant Vacant

Related MLS # _____

***Bank Owned (REO)** Yes No

Remarks

***Public Remarks** (Limit: 1500 Characters)

Remarks/Directions

Public Remarks (Addendum) (Limit: 2400 Characters)

Agent Remarks (Limit: 500 Characters)

Agreement/Disclosure

VALID LISTING AGREEMENT STATEMENT

I, the undersigned Broker or Authorized Agent, represent to the SmartMLS Inc, its members and cooperating agents, that I have a valid and legally enforceable: (1.) "Exclusive Right to Sell" listing agreement; or (2.) "Exclusive Agency" listing agreement; or (3.) "Exclusive Right to Lease" agreement, with the owners of the above entitled property. The information contained in the data information sheet is, to the best of my knowledge and belief, true and accurate.

Listing Broker or Authorized Agent Signature: _____ **Date:** _____

AUTHORIZATION TO USE THE MULTIPLE LISTING SERVICE AND DISCLAIMER

The Undersigned Owner(s) authorize and instruct(s) the Broker to submit the information contained herein to the SmartMLS Inc, for the purpose of offering the property for sale or lease through its participants during the period specified. This information has been furnished by the Seller and/or other sources and is not guaranteed by the Broker. Owner(s) agree that the information herein is true and correct to his/her/their knowledge. It is understood that there is no contractual relationship between the Owner(s) and the SmartMLS Inc. Receipt of a copy of this Property Data Form is Acknowledged by Owner(s).

Listing Broker or Authorized Agent Signature: _____ **Date:** _____

Seller's Signature: _____ **Date:** _____

Seller's Signature: _____ **Date:** _____